PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY				Attorney E	ocket No.			
PATENT APPLICATION				First Inver	tor	TED	MICH	<b></b>
TRANSMITTAL				Title		OWN	ER	
(Only for new nonprovisional applications under 37 CFR 1.53(b))				Express N	fail Label No.			
See MPEP c		ION ELEMENT ming utility patent app		ADDRE	SS TO:	Commissione P.O. Box 1456		
1.  Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status.  See 37 CFR 1.27.  Specification [Total Pages] (preferred arrangement set forth below)  - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4.  Drawing(s) (35 U.S.C. 113) [Total Sheets]  5. Oath or Declaration [Total Sheets] a. Newly executed (original or copy)  b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  Preliminary Amendment  14. Return Receipt Postcard (MPEP 503)					
i. DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76				(Should be specifically itemized)  15. Certified Copy of Priority Document(s)  (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122  (b)(2)(B)(i). Applicant must attach form PTO/SB/35  or its equivalent.  17. Other:				
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the								
			ropnate box, and su n Data Sheet under :			n below and I	n the Tirst sei	ntence of the
Contin	nuation	Divisional Divisional	Continu	ation-in-part (0	CIP) of pr	ior application t	No.:	
Prior application information:  Examiner  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  19. CORRESPONDENCE ADDRESS								
			19. CORRESPON	IDENCE A		····		
LL Custom	ner Number:	L			OR	Corresp	ondence add	ress below
Name	TED				n)	A 571 6		
Address	LWO CO	RPORATIO	N 3841	N. C	PLUMBI	A BLV	D·	
City	PORTL	AND		<del></del>	9K		Zip Code	97217
Country					503 28		Fax	286 4092
Name (Print/Ty	ре)	1/1/	4	Registrati	on No. (Attorne		Date	111/2
Signature This collection of	k //	duired by 27 CEP 4	53(b). The information	is required to	obtain or retain		19/	16/03
ins collection of	unformation is re	quired by 37 CFR 1.	ວວ(ນ). The Information	is tedrited to	OULDIN OF FEIDIN	a penent by th	te public Writer	minutes to complete

USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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## FEE TRANSMITTAL for FY 2003

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370,00

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete it Known						
Application Number						
Filing Date						
First Named Inventor	TED MICK					
Examiner Name						
Art Unit						
Attorney Docket No.						

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit card Money Other None	3. ADDITIONAL FEES						
Deposit Account:	Large Entity   Small Entity						
Deposit Account.			Fee Fee Code (\$)		Fee Description	Fee Paid	
Account	1051	130	2051	( <del>*</del> /	Surcharge - late filing fee or oath	ree Paid	
Number Deposit	1052	50	2052	25	Surcharge - late provisional filing fee or		
Account Name					cover sheet	l	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification For filing a request for ex parte reexamination	<b></b>	
Charge fee(s) indicated below Credit any overpayments		2,520	j	•	* '		
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<b>  </b>	
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after	1	
to the above-identified deposit account.	4054	440	2054		Examiner action		
FEE CALCULATION	1251	110	2251 2252	55	Extension for reply within first month  Extension for reply within second month		
1. BASIC FILING FEE	1252 1253	410	2253		',		
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	1253	930 1,450	2253		Extension for reply within third month		
Code (\$) Code (\$)			ł	725		<b> </b>	
1001 750 2001 375 Utility filing fee \$ 370.00		1,970	2255		• •		
1002 330 2002 165 Design filing fee	1401	320	2401		Notice of Appeal	<del>  </del>	
1003 520 2003 260 Plant filing fee	1402	320	2402		Filing a brief in support of an appeal	<del> </del>	
1004 750 2004 375 Reissue filing fee	1403	280	2403		Request for oral hearing	<del>  </del>	
1005 160 2005 80 Provisional filing fee	1451	.,	1451	.,	Petition to institute a public use proceeding	<del> </del>	
SUBTOTAL (1) (\$) 370.00	1452	110	2452		Petition to revive - unavoidable	<b> </b>	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453		Petition to revive - unintentional	<b> </b>	
Fee from		1,300	2501		Utility issue fee (or reissue)	<b></b>	
Extra Claims below Fee Paid  Total Claims 20** = X =	1502	470	2502		Design issue fee	<b> </b>	
Independent	1503	630	2503		S Plant issue fee	<del>  </del>	
Claims Multiple Dependent	1460	130	1460		Petitions to the Commissioner	<del>  </del>	
Large Entity   Small Entity	1807	50	180		Processing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description	1806	180	180		Submission of Information Disclosure Stmt	<del>  </del>	
Code (\$)   Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)		
1202	1809	750	280	9 375	Filing a submission after final rejection (37 CFR 1.129(a))		
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	281	0 375	For each additional invention to be examined (37 CFR 1.129(b))		
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	375	5 Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802		Request for expedited examination of a design application		
770	Other fee (specify)				<u> </u>		
SUBTOTAL (2) ((\$) 5 / \$\bar{U} \cdot oo\) **or number previously paid, if greater; For Reissues, see above	*Red	uced by	/ Basic	Filing F	Fee Paid SUBTOTAL (3) (\$)		

SUBMITTED BY	(Complete (if applicable))	(Complete (if applicable))		
Name (Print/Type)	TED MICK	Registration No. (Attorney/Agent)	Telephone 503 28	16 4092
Signature	* Yal 620	L1'	Date 9//6	103

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